Contains Nonbinding Recommendations

Draft – Not for Implementation

Draft Guidance on Pentamidine Isethionate

May 2026

This draft guidance, when finalized, will represent the current thinking of the Food and Drug Administration (FDA, or the Agency) on this topic. It does not establish any rights for any person and is not binding on FDA or the public. You can use an alternative approach if it satisfies the requirements of the applicable statutes and regulations. To discuss an alternative approach, contact the Office of Generic Drugs.

In general, FDA's guidance documents do not establish legally enforceable responsibilities. Instead, guidances describe the Agency's current thinking on a topic and should be viewed only as recommendations, unless specific regulatory or statutory requirements are cited. The use of the word *should* in Agency guidances means that something is suggested or recommended, but not required.

Active Ingredient: Pentamidine isethionate

Dosage Form: For solution

Route: Inhalation

Strength: 300 mg/vial | 600 mg/vial

Reference Listed Drug: NDA 019887

Recommended Study: Request for waiver of in vivo bioequivalence study requirements

Waiver request of in vivo bioequivalence study: To qualify for a waiver of evidence of in vivo bioavailability or bioequivalence study requirement under 21 CFR 320.22(b)(3), generic versions of pentamidine isethionate (300 mg/vial, 600 mg/vial) inhalation powder for solution should contain the same active drug ingredient in the same concentration and dosage form as the reference listed drug (RLD) and contain no inactive ingredient or other change in formulation from the RLD that may significantly affect systemic or local availability.

For an inhalation powder for solution drug product for nebulization that differs from the RLD in inactive ingredients [as permitted by the chemistry, manufacturing and controls regulations for abbreviated new drug applications (ANDAs), 21 CFR 314.94(a)(9)(v)], the regulation specifies that the prospective applicant must identify and characterize the differences and provide information demonstrating that the differences do not affect the safety or efficacy of the proposed drug product.

In general, evidence to demonstrate that the formulation of the test product should not alter the systemic or local availability of pentamidine isethionate, compared to that of the RLD, may be based upon a comparison of the formulation composition as well as relevant quality and performance attributes of the test product and RLD.

Considerations for non-Q1/Q2 formulations: If the test product and RLD are not qualitatively (Q1) and quantitatively (Q2) the same as defined in the guidance for industry *ANDA Submissions – Refuse-to-Receive Standards*[a], relevant quality and performance attributes should include appearance, pH, osmolality following reconstitution and any other potentially relevant physical and chemical properties, characterized for a minimum of three batches of the test and three batches (as available) of the RLD.

Meeting recommendations: RLD labeling specifies what nebulizer should be used for dose administration. If a prospective applicant wants to explore use of their test product with a nebulizer different from that specified in the RLD labeling, the prospective applicant should submit a pre-ANDA product development meeting request to discuss potential information that may be needed for establishing equivalence to the RLD, and other product development questions. For additional information, refer to the guidance for industry *Formal Meetings Between FDA and ANDA Applicants of Complex Products Under GDUFA*.[a]

Document History: Recommended May 2026

[a] We update guidances periodically. For the most recent version of a guidance, refer to the FDA guidance webpage at https://www.fda.gov/regulatory-information/search-fda-guidance-documents.